



PTO/SB/21 (09-06)

Approved for use through 03/31/2007. OMB 0651-0031  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

IFP

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## TRANSMITTAL FORM

*(to be used for all correspondence after initial filing)*

		Application Number	10/528,407 – Conf. #4454
		Filing Date	March 18, 2005
		First Named Inventor	Oiva PEHKONEN
		Art Unit	1754
		Examiner Name	T. Yanoy
Total Number of Pages in This Submission	10	Attorney Docket Number	43289-215080

### ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
<input checked="" type="checkbox"/> Response to Office Action <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition for Extension of Time <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Response to Notice to File Missing Parts <input type="checkbox"/> Inventor Declaration <input type="checkbox"/> Information Disclosure Statement, PTO/SB/08A <input type="checkbox"/> Claim for Priority and Certified Document <input type="checkbox"/> Copy of Notice to File Missing Parts <input type="checkbox"/> Assignment	<input type="checkbox"/> Request for Corrected Filing Receipt <input type="checkbox"/> CD, Number of CD(s) <input type="checkbox"/> Landscape Table on CD	
		Remarks

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	VENABLE LLP		
Signature			
Printed name	Eric J. Franklin		
Date	June 8, 2007	Reg. No.	37,134

#865643



Under the Paperwork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number.

Effective on 12/08/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

# FEET TRANSMITTAL

## For FY 2007

Applicant claims small entity status. See 37 CFR 1.27

<b>TOTAL AMOUNT OF PAYMENT</b>	<b>(\$)</b>	<b>- 0 -</b>	Attorney Docket No.	<b>43289-215080</b>
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**Complete if Known**

Application Number	<b>10/528,407 – Conf. #4454</b>
Filing Date	<b>March 18, 2005</b>
First Named Inventor	<b>Oiva PEHKONEN</b>
Examiner Name	<b>T. Yanoy</b>
Art Unit	<b>1754</b>

**METHOD OF PAYMENT** (check all that apply)

Check  Credit Card  Money Order  None  Other (please identify): \_\_\_\_\_

Deposit Account Deposit Account Number: **22-0261** Deposit Account Name: **Venable LLP**

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below  Charge fee(s) indicated below, except for the filing fee

Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17  Credit any overpayments

**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

<u>Application Type</u>	<u>FILING FEES</u>		<u>SEARCH FEES</u>		<u>EXAMINATION FEES</u>		
	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fees Paid (\$)</u>
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

**2. EXCESS CLAIM FEES**Fee Description

Each claim over 20 (including Reissues)

<u>Fee (\$)</u>	<u>Small Entity</u>
50	25

Each independent claim over 3 (including Reissues)

200	100
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Multiple dependent claims

360	180
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<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
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<u>Multiple Dependent Claims</u>	
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- 20 =	x	=	
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<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
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HP = highest number of total claims paid for, if greater than 20.

<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
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- 3 =	x	=	
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HP = highest number of independent claims paid for, if greater than 3.

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
- 100 =	/50	(round up to a whole number) x	=	

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

<u>Fees Paid (\$)</u>
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Other (e.g., late filing surcharge):

**SUBMITTED BY**

Signature		Registration No. (Attorney/Agent)	<b>37,134</b>	Telephone	<b>(202) 344-4000</b>
Name (Print/Type)	<b>Eric J. Franklin</b>			Date	<b>June 8, 2007</b>

#865644



THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: :  
Pehkonen et al. : Attorney Docket: 43289-215080  
Application No.: 10/528,407 : Art Unit: 1754  
Filed: March 18, 2005 : Examiner: T. Yanoy

Title: A METHOD AND AN APPARATUS FOR PROCESSING FLUE GAS SCRUBBER MATERIAL FLOWS

RESPONSE TO OFFICE ACTION

Commissioner for Patents  
P.O. Box 1450  
Alexandria, Virginia 22313-1450

Sir:

In response to the office action issued March 8, 2007, please amend the above-identified application as follows:

**Amendments to the Claims** begin on page 2 of this Response.

**Remarks** begin on page 7 of this Response.